

EXHIBIT 8

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

Employee Name: <i>Phyllis Atkinson</i>	Title: <i>PCT</i>	Rating Period: March 1, <i>2002</i> February 28, <i>2003</i>
SSN: <i>157 54 6131</i>	Dept/Agency - Location: <i>DDP / DHS / NJDC</i>	

Section 1 - Job Expectations and Evaluation (Continued)

Interim Evaluation				
Major Job Responsibilities	Essential Criteria Statement of conditions that exist when a job has been completed at the commendable level.	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
1. Daily Timekeeping PRN. Medical weekly schedules/trips	Insures that daily timekeeping records are maintained and submitted in accordance with existing Division procedures.	300	300 ✓	300
2. Filing	Prepares files and submissions in accordance with the needs of the Department. Updates in compliance with Records Retention schedule.	303	303 ✓	303
3. Security	Insures safekeeping of materials and other office supplies. Locks essential items as warranted. Reports damaged or missing items as necessary.	306	306 ✓	306
Purchases/Inventory PRN	Prepares, submits, and receives purchase requisitions and materials in accordance with established Center procedures. Provides follow through and inventory receipt accountability. Implements appropriate reorder controls for office supplies.	309	309 ✓	309
5. Manuals and Reports. Internal and External consents.	Enters, revises and updates policies and manuals timely and as required. Produces reports for overtime hours expended, and prepares statistics for Monthly Highlight submission.	312	312 ✓	312
6. Telephone/Direction	Maintains assignment focus. Follows direction both written and oral. Accepts responsibility for follow through and required notifications. Provide prompt response to phone emergencies and requests.	315	315 ✓	315
7. Ensures timely completion of Medical trips.	Priority/emergency medical appointments (consult) within one month. Routine medical appointments/consults within three months.	318	318 ✓	318
8. Provides Customer Service by identifying and meeting customer needs (internal & external) while meeting time, quality and cost criteria requirements.	Accurately assesses customer needs; provides necessary or requested service within acceptable time frames requiring few corrections or revisions; implements plans to increase customer satisfaction, seeks customer feedback and expression of satisfaction with work product.	344	344 ✓	344

ATKINSON PERS 98

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: <u>Rhylles Atkinson</u>	Title: <u>PCT</u>	Rating Period: March 1, <u>2008</u> February 28, <u>2009</u>
SSN: <u>157 54 631</u>	Dept/Agency - Location: <u>0001 DHS/NJDC</u>	

Section 1 - Job Expectations and Evaluation (Continued)

Interim Evaluation				
Major Job Responsibilities	Essential Criteria Statement of conditions that exist when a job has been completed at the commendable level.	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
9. Effectively Communicates ideas, concepts or directions orally and in writing.	Seldom miscommunicates ideas, thoughts or directions. Asks appropriate questions and involves the listener. Seeks clarification and affirms understanding in verbal exchanges. Uses appropriate non-verbal communication. Formal presentations are organized, tailored to the intended audience, have appropriate detail and are completed within established timeframes. Written communication contains appropriate grammar, is well organized and completed within established timeframes. Generally main points are understood by intended audience.	347	347	347
Exercises Teamwork within the work group by working collaboratively as a team member to accomplish stated goals.	Supports the team in meeting essential objectives. Responsibly accomplishes work assignments within established timeframes in support of team objectives. Effectively cooperates with and contributes to help meet established team goals. Offer demonstrable examples of actions taken to increase the team's effectiveness. Works to encourage good performance from others.	368	368 	365
Total Checks	(Total Number of Checks in Each Column)	<u> </u> ✓	<u>8</u> ✓	<u>2</u> ✓
Check Value	(Multiply Total of Column Checks by Designated Number in Column)	X 1	X 2	X 3
Points Accumulated	(Record Results of Column Multiplication)		<u>16</u>	<u>6</u>
Total Points Accumulated	(Total All Points Across All Columns)			600 <u>22</u>

ATKINSON PERS 99

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

Active Model # A90651

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

PARS

Employee Name: Phyllis AtkinsonTitle: PCTRating Period: March 1, 2002 February 28, 2003SSN: 157 54 6131Dept/Agency - Location: DO of DHS/ NJDC

Section 3 - Justification Sheet and Development Plan - Interim

Justification for Interim Evaluation 700

Ms. Atkinson has the sole responsibility of calling facilitators and outside consultants. She coordinates consults, labwork and necessary consults from questions. She also prepares the weekly medical trip calendar. She works to ensure smooth coordination of services.

600
Interim Rating

Interim Development Plan

Specific Area(s) Identified for Development	Specific Action to be Taken by Ratee
705 ① Continue in conjunction with nursing staff both in HCE & the cottage to improve & assist information to schedule consultations in a timely & expeditious manner. ② Enter necessary diagnosis and allergy info onto new client info sheets for computer input.	① Confer with cottage and HCE nursing staff and/or unit supervisors to ensure outside medical consultations. ② Please complete entering required and updated information in the HCE computer within this quarter.

I have reviewed Sections 1, 2 and 3 of this package and have had a face-to-face meeting with my supervisor to discuss the Interim Rating, Justification and Development Plan. This meeting was held on 10/24/02 (Date). 710

My signature indicates that I have been advised of these PAR elements.

Ratee [Signature] 715Date 10/24/02 720

I ☒ Agree ☐ Disagree with the Interim Rating. 725
I ☒ Agree ☐ Disagree with the Justification. 730
I ☒ Agree ☐ Disagree with the Development Plan. 735

Ratee Comments 760

(Use Additional Sheets as Necessary)

My signature indicates that the Ratee's positions have been noted.

Rater [Signature] 740Date 10/24/02 745Rater's Social Security # [Redacted]

My signature indicates that the Ratee's positions have been noted.

Reviewer [Signature] 750Date 10/24/02 755

ATKINSON PERS 100

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

Performance Assessment Review
 Work Standard Checklist Model
 New Jersey Department of Human Services
 North Jersey Developmental Center

Employee Name: Phyllis Atkinson Title: PCT Rating Period: March 1, 2002 - February 28, 2003
 SSN: 157 54 6131 Dept/Agency - Location: DDO/DHS/NJDC

Section 5 - Fact Sheet of Significant Performance Events

Description of Significant Performance Event	Rater Comments/Recommended Action
900 Mrs Atkinson has returned to her her responsibilities after a lengthy convalescence. She has assumed her responsibilities without delay	Thank you. Welcome Back <div style="display: flex; justify-content: space-between;"> Ratee Initials Rater Initials <u>YB</u> Date </div>
900	<div style="display: flex; justify-content: space-between;"> Ratee Initials Rater Initials Date </div>
900	<div style="display: flex; justify-content: space-between;"> Ratee Initials Rater Initials Date </div>
900	<div style="display: flex; justify-content: space-between;"> Ratee Initials Rater Initials Date </div>

Ratee Comments: (Use Additional Sheets as Necessary) 910

Active Model # A90651

Rating Cycle Ending 2003

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

PARS

Employee Name: <u>Phyllis A. Thompson</u>	Title: <u>PCT</u>	Rating Period: March 1, <u>2002</u> - February 28, <u>2003</u>
SSN: <u>157 54 6131</u>	Dept/Agency - Location: <u>0001/DHS/NTDC</u>	

Section 1 - Job Expectations and Evaluation

5 Major Goals of the Unit/Work Group	10 Major Goals of the Ratee
(1) To keep current with mandatory training. (2) Ensure that all customers receive optimal clinical services. (3) Provide customer friendly service to all.	(1) Attend in services as assigned. (2) Provide emergency care as needed to staff and clients under the guidance of nursing. (3) Be courteous, helpful, & friendly to clients & staff.
Please check (✓) One: <input type="checkbox"/> Title Change <input type="checkbox"/> Change in Supervisor <input type="checkbox"/> Revised <input type="checkbox"/> New Hire <input type="checkbox"/> PAR Cycle	

<p>I have reviewed this package and have had a face-to-face meeting with my supervisor to discuss the Major Goals of the Unit, Basic Ratee Assignment, Job Responsibilities, Essential Criteria, Point Accumulation Methodology, and the Evaluation Conversion to the Overall Rating by which I will be rated. This meeting was held on <u>3/14/02</u> (Date). 15</p> <p>My signature indicates that I have been advised of these PAR elements.</p> <p>Ratee <u>[Signature]</u> 20</p> <p>Date <u>3/14/02</u> 25</p> <p>I <input checked="" type="checkbox"/> Agree <input type="checkbox"/> Disagree with the elements of this PAR. 30</p>	<p>Ratee Comments 55</p> <p style="text-align: center;">ATKINSON PERS 102</p>
<p>My signature indicates that the Ratee's positions have been noted.</p> <p>Rater <u>Yvonne Brown</u> 35</p> <p>Raters Social Security # <u>[Redacted]</u></p> <p>Date <u>3/14/02</u> 40</p> <p>My signature indicates that the Ratee's positions have been noted.</p> <p>Reviewer <u>Cathy Walker</u> 45</p> <p>Date <u>3/14/02</u> 50</p>	

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

Active Model # A90651

Rating Cycle Ending 2003

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

PARS

Employee Name: Phyeles Attinson Title: PCT Rating Period: March 1, 02 - February 28, 03
SSN: 187 84 6131 Dep/Agency - Location: _____

Section 4 - Justification Sheet and Development Plan - Final

655

Final Rating

2

Justification for Final Evaluation 800

Ms Attinson continues to take responsibility of facilitating outside medical trips for NJDC clients. She puts forth her efforts to ensure a smooth coordination

Final Development Plan

Specific Area(s) Identified for Development

Specific Action to be Taken by Ratee

805

① Please continue entering clients admission data into HEC computer.

① Enter required personal data pertinent to NJDC clients please complete by the end of quarter.

② To keep current with mandatory HIPAA/OPRA training.

② Attend inservices as assigned @ NJDC or off campus.

I have reviewed Sections 1, 2 and 4 of this package and have had a face-to-face meeting with my supervisor to discuss the Final Rating, Justification and Development Plan. This meeting was held on

2/28/03 (Date). 810

My signature indicates that I have been advised of these PAR elements.

Ratee [Signature] 815

Date 2/24/03 820

I ☒ Agree _____ Disagree with the Final Rating. 825
I ☒ Agree _____ Disagree with the Justification. 830
I ☒ Agree _____ Disagree with the Development Plan. 835

Ratee Comments 860

(Use Additional Sheets as Necessary)

My signature indicates that the Ratee's positions have been noted.

Rater Gaianne Benin for 840

Date 2/24/03 845

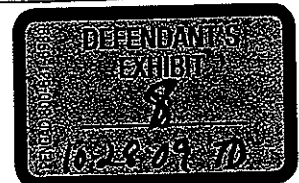
Rater's Social Security # [Redacted]

My signature indicates that the Ratee's positions have been noted.

Reviewer Cristi Kuebler 850

Date 3/1/03 855

ATKINSON PERS 120



Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

Employee Model # A90651

Rating Cycle Ending 2003

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: Phyllis AtkinsonTitle: PCTRating Period: March 1, 02 - February 28, 03SSN: 157 84 6131Dept/Agency - Location: 000 DHS NJDC**Section 1 - Job Expectations and Evaluation (Continued)**

Final Evaluation				
Major Job Responsibilities	Essential Criteria Statement of conditions that exist when a job has been completed at the commendable level.	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
1. Daily Timekeeping PRN. Medical weekly schedules/trips	Insures that daily timekeeping records are maintained and submitted in accordance with existing Division procedures.	300	300 ✓	300
2. Filing	Prepares files and submissions in accordance with the needs of the Department. Updates in compliance with Records Retention schedule.	303	303 ✓	303
3. Security	Insures safekeeping of materials and other office supplies. Locks essential items as warranted. Reports damaged or missing items as necessary.	306	306 ✓	306
Purchases/Inventory PRN	Prepares, submits, and receives purchase requisitions and materials in accordance with established Center procedures. Provides follow through and inventory receipt accountability. Implements appropriate reorder controls for office supplies.	309	309 ✓	309
5. Manuals and Reports. Internal and External consents.	Enters, revises and updates policies and manuals timely and as required. Produces reports for overtime hours expended, and prepares statistics for Monthly Highlight submission.	312	312 ✓	312
6. Telephone/Direction	Maintains assignment focus. Follows direction both written and oral. Accepts responsibility for follow through and required notifications. Provide prompt response to phone emergencies and requests.	315	315 ✓	315
7. Ensures timely completion of Medical trips.	Priority/emergency medical appointments (consult) within one month. Routine medical appointments/consults within three months.	318	318	318 ✓
8. Provides Customer Service by identifying and meeting customer needs (internal & external) while meeting time, quality and cost criteria requirements.	Accurately assesses customer needs; provides necessary or requested service within acceptable time frames requiring few corrections or revisions; implements plans to increase customer satisfaction, seeks customer feedback and expression of satisfaction with work product.	344	344	344 ✓

ATKINSON PERS 121

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

Employee Name: Phyllis Atkinson Title: PCT Rating Period: March 1, 02 - February 28, 03
SSN: 157 84 6131 Dept/Agency - Location:

Section 1 - Job Expectations and Evaluation (Continued)

Final Evaluation				
Major Job Responsibilities	Essential Criteria Statement of conditions that exist when a job has been completed at the commendable level.	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
9. Effectively Communicates ideas, concepts or directions orally and in writing.	Seldom miscommunicates ideas, thoughts or directions. Asks appropriate questions and involves the listener. Seeks clarification and affirms understanding in verbal exchanges. Uses appropriate non-verbal communication. Formal presentations are organized, tailored to the intended audience have appropriate detail and are completed within established timeframes. Written communication contains appropriate grammar, is well organized and completed within established timeframes. Generally main points.	347	347	347
10. Exercises Teamwork within the work group by working collaboratively as a team member to accomplish stated goals.	Supports the team in meeting essential objectives. Responsibly accomplishes work assignments within established timeframes in support of team objectives. Effectively cooperates with and contributes to help meet established team goals. Offer demonstrable examples of actions taken to increase the team's effectiveness. Works to encourage good performance from others.	368	368	368
Total Checks	(Total Number of Checks in Each Column)	✓	7 ✓	3 ✓
Check Value	(Multiply Total of Column Checks by Designated Number in Column)	X 1	X 2	X 3
Points Accumulated	(Record Results of Column Multiplication)		14	9
Total Points Accumulated	(Total All Points Across All Columns)			655 23

ATKINSON PERS 123

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

Rating Cycle Ending 2003

Active Model # A90651

Performance Assessment Review
 Work Standard Checklist Model
 New Jersey Department of Human Services
 North Jersey Developmental Center

Employee Name: Phyllis Atkinson Title: PCT Rating Period: March 1, 2002 - February 28, 2003
 SSN: 157 54 6131 Dept/Agency - Location: DDO/DHS/NTDC

Section 5 - Fact Sheet of Significant Performance Events

Description of Significant Performance Event	Rater Comments/Recommended Action
900 Ms Atkinson has returned to her responsibilities after a lengthy convalescence. She has assumed her responsibilities without delay.	Thank you, Welcome Back PA Ratee Initials <u>yl</u> Rater Initials <u>yl</u> Date <u>10/02</u>
900 Ms Atkinson acted as back-up picking up & delivering the mail during Miss Rhonda's absence Dec 2nd 02	Thank you for your assist PA was valuable Ratee Initials <u>yl</u> Rater Initials <u>yl</u> Date <u>3/24/03</u>
900 Ms Atkinson has suggested a plan to completely update, redo and create a system for computerized data sheets for clients.	Your idea is excellent Can't wait for its implementation PA Ratee Initials <u>yl</u> Rater Initials <u>yl</u> Date <u>3/24/03</u>
900	

Ratee Comments: (Use Additional Sheets as Necessary) 910

ATKINSON PERS 122

Please Make Copies and Distribute to Ratee, Reviewer and PAR Coordinator

EXHIBIT 9

Active Model # A90651

Rating Cycle Ending 2004

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

Employee Name: Phyllis Atkinson
SSN: 157 54 6131

Title: PCT

Rating Period: March 1, 2003 – February 28, 2004

Dept/Agency - Location: DHS/DDD – North Jersey Developmental Center

Section 1 - Job Expectations and Evaluation

5 Major Goals of the Unit/Work Group	10 Major Goals of the Ratee
① Keep current with mandatory training ② Ensure that all customers receive optimal clerical services ③ Provide customer friendly service to all.	① Attended in services as assigned ② Provide emergency assist as needed to staff & clients under the guidance of nursing. ③ Be courteous, helpful & friendly to clients & staff.

I have reviewed this package and have had a face-to-face meeting with my supervisor to discuss the Major Goals of the Unit, Basic Ratee Assignment, major job responsibilities, Essential Criteria, Point Accumulation methodology, and the Evaluation Conversion to the Overall Rating by which I will be rated. This meeting was held on: 3/24/03 (Date). 15

Ratee Comments 55

My signature indicates that I have been advised of these PAR elements.

Ratee [Signature] 20Date 3/24/03 25I ☒ Agree ☐ Disagree with the elements of this PAR. 30

My signature indicates that the Ratee's positions have been noted.

Rater Guanilo Benim RN 35Date 3/24/03 40

My signature indicates that the Ratee's positions have been noted.

Reviewer Carole Walker RN 45Date 5/6/03 50Rater's Social Security Number [Redacted]

(Use Additional Sheets as Necessary)

Active Model # A90651

Rating Cycle Ending 2004

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: Phyllis Atkinson Title: PT Rating Period: March 1, 2003 – February 28, 2004
 SSN: 157 54 6431 Dept/Agency - Location: DHS/DDD – North Jersey Developmental Center

Section 1 - Job Expectations and Evaluation (Continued)

<div align="center"> Evaluation FINAL </div>				
Major Job Responsibilities	Essential Criteria <small>Statement of conditions that exist when a job has been completed at the commendable level</small>	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
1. Daily Timekeeping PRN. Medical weekly schedules/trips	Insures that daily timekeeping records are maintained and submitted in accordance with existing Division procedures.	300	300 ✓	300
2. Filing	Prepares files and submissions in accordance with the needs of the Department. Updates in compliance with Records Retention schedule.	303	303 ✓	303
3. Security	Insures safekeeping of materials and other office supplies. Locks essential items as warranted. Reports damaged or missing items as necessary.	306	306	306 ✓
Purchases/Inventory PRN	Prepares, submits, and receives purchase requisitions and materials in accordance with established Center procedures. Provides follow through and inventory receipt accountability. Implements appropriate reorder controls for office supplies.	309	309 ✓	309
5. Manuals and Reports. Internal and External consents.	Enters, revises and updates policies and manuals timely and as required. Produces reports for overtime hours expended, and prepares statistics for Monthly Highlight submission.	312	312 ✓	312
6. Telephone/Direction	Maintains assignment focus. Follows direction both written and oral. Accepts responsibility for follow through and required notifications. Provide prompt response to phone emergencies and requests.	315	315 ✓	315
7. Ensures timely completion of Medical trips.	Priority/emergency medical appointments (consult) within one month. Routine medical appointments/consults within three months.	318	318	318 ✓
8. Provides Customer Service by identifying and meeting customer needs (internal & external.	Accurately assesses customer needs; provides necessary or requested service within acceptable time frames requiring few corrections or revisions; seeks customer feedback and expression of satisfaction with work product.	344	344	344 ✓

Active Model # A90651

Rating Cycle Ending 2004

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: Phyllis Atkinson
SSN: 157546131Title: PCT

Rating Period: March 1, 2003 – February 28, 2004

Dept/Agency - Location: DHS/DDD – North Jersey Developmental Center

Section 1 - Job Expectations and Evaluation (Continued)

Evaluation <i>FINAL</i>				
Major Job Responsibilities	Essential Criteria <small>Statement of conditions that exist where a job has been completed at the commendable level</small>	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
9. Effectively Communicates ideas, concepts or directions orally and in writing.	Seldom miscommunicates ideas, thoughts or directions. Asks appropriate questions and involves the listener. Seeks clarification and affirms understanding in verbal exchanges. Uses appropriate non-verbal communication. Formal presentations are organized, have appropriate detail and are completed within established timeframes. Written communication contains appropriate grammar, is well organized and completed within established timeframes. Generally intended audience understands main points.	347	347 ✓	347
7. Exercises Teamwork within the work group by working collaboratively as a team member to accomplish stated goals.	Supports the team in meeting essential objectives. Responsibly accomplishes work assignments within established timeframes in support of team objectives. Effectively cooperates with and contributes to help meet established team results. Works to encourage good performance from others.	368	368	365 ✓
Total Checks	(Total Number of Checks in Each Column)	— ✓	6 ✓	4 ✓
Check Value	(Multiply Total of Column Checks by Designated Number in Column)	X 1	X 2	X 3
Points Accumulated	(Record Results of Column Multiplication)		12	12
Total Points Accumulated	(Total All Points Across All Columns)	24 ⁶⁰⁰		

52.
Data
MED TRIP

Active Model # A90651

Rating Cycle Ending 2004

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: <u>Phyllis Atkinson</u>	Title: <u>PCT</u>	Rating Period: March 1, 2003 - February 29, 2004
SSN: <u>157 54 6131</u>	Dept/Agency - Location: <u>HCC</u>	

Section 5 - Fact Sheet of Significant Performance Events

Description of Significant Performance Event	Rater Comments/Recommended Action
900 Data sheets have been taken and put in individual books (for the cottages), alphabetized for easy access	<p>Good job! Keep it going</p> <p>PA CW 4/23/04</p> <p>Ratee Initials Rater Initials Date</p>
900 Attains appointments at a moments notice for an urgent medical need of a client	<p>Thank you Phyllis</p> <p>PA CW 4/23/04</p> <p>Ratee Initials Rater Initials Date</p>
900 A meeting was held to discuss the importance of informing the ADRL of a change in the writer calendar. These transportation departures are a change in the writer calendar.	<p>When an add on or a cancellation happens please call the ADRL office cottage nurse, CTs to inform them. In the near future this will be communicated by e-mail</p> <p>PA CW 4/23/04</p> <p>Ratee Initials Rater Initials Date</p>
900	<p>Ratee Initials Rater Initials Date</p>

Ratee Comments: (Use Additional Sheets as Necessary) 910

ATKINSON PERS 111

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Performance Assessment Review
 Work Standard Checklist Model
 New Jersey Department of Human Services
 North Jersey Developmental Center

Rating Period: March 1, 2003 - February 28, 2004

PARS

Employee Name: Phyllis Atkinson Title: PCT

SSN: 157 646 131 Dept/Agency - Location: DHS/DDD - North Jersey Developmental Center

Section 4 - Justification Sheet and Development Plan - Final

Ms. Atkinson PCT schedules the medical trips for the clients who live in the cottages. She also makes transportation arrangements for the clients and operates a weekly calendar to organize the medical trips. She is aware of the importance of certain medical conditions and the urgency of the appointments. She plays an important role in a Code 55 by taking charge of the phone calls and doctor preparing paper work and a help for the team at the.

Final Development Plan

Specific Area(s) Identified for Development	Specific Action to be Taken by Ratee
805) Communication	1) Open communication with supervisor, cottages, ADL office and transportation
2) Input into the computer	2) Input needs to be current in the computer and reviewed quarterly for any updates
3) Attend in services as assigned	3) Attend classes when assigned

I have reviewed Sections 1, 3 and 4 of this package and have had a face-to-face meeting with my supervisor to discuss the Final Rating, Justification and Development Plan. This meeting was held on 4/23/04 (Date). 810

My signature indicates that I have been advised of these PAR elements.

Ratee _____ 815

Date 4/23/04 820

I _____ Agree _____ Disagree with the Final Rating. 825
 I _____ Agree _____ Disagree with the Justification. 830
 I _____ Agree _____ Disagree with the Development Plan. 835

My signature indicates that the Ratee's positions have been noted.

Rater Christie Walker, R. Ron Wood 840

Date 4/23/04 845

Ratee's Social Security # [REDACTED]

Ratee Comments 850 I DO NOT agree with my Final Rating I AM Requesting A Meeting ASAP.

(Use Additional Sheets as Necessary)

My signature indicates that the Ratee's positions have been noted.

Reviewer [Signature] 850

Date 5/26/04 855



Active Model # A90651

Rating Cycle Ending 2004

**Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center**

Employee Name: <i>Phyllis Atkinson</i>	Title: <i>RCT</i>	Rating Period: March 1, 2003 – February 28, 2004
SSN: <i>157 54 6831</i>	Dept/Agency - Location: DHS/DDC – North Jersey Developmental Center	

Section 1 - Job Expectations and Evaluation (Continued)

<div align="center"> FINAL Evaluation </div>				
Major Job Responsibilities	Essential Criteria <small>Statement of conditions that exist when a job has been completed at the commendable level.</small>	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
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Purchases/Inventory PRN	Prepares, submits, and receives purchase requisitions and materials in accordance with established Center procedures. Provides follow through and inventory receipt accountability. Implements appropriate reorder controls for office supplies.	309	309 ✓	309
5. Manuals and Reports. Internal and External consents.	Enters, revises and updates policies and manuals timely and as required. Produces reports for overtime hours expended, and prepares statistics for Monthly Highlight submission.	312	312 ✓	312
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7. Ensures timely completion of Medical trips.	Priority/emergency medical appointments (consult) within one month. Routine medical appointments/consults within three months.	318	318	318 ✓
8. Provides Customer Service by identifying and meeting customer needs (internal & external.	Accurately assesses customer needs; provides necessary or requested service within acceptable time frames requiring few corrections or revisions; seeks customer feedback and expression of satisfaction with work product.	344	344	344 ✓

Performance Assessment Review
 Work Standard Checklist Model
 New Jersey Department of Human Services
 North Jersey Developmental Center

Employee Name: Angelo Atkinson Title: PCT Rating Period: March 1, 2003 – February 28, 2004
 SSN: 157546131 Dept/Agency - Location: DHS/DDD – North Jersey Developmental Center

Section 1 - Job Expectations and Evaluation (Continued)

<div style="text-align: center;"> Evaluation FINAL </div>				
Major Job Responsibilities	Essential Criteria <small>Statement of conditions that exist when a job has been completed at the commendable level</small>	(1) Achieved No Essential Criteria	(2) Achieved Essential Criteria	(3) Significantly Exceeded Essential Criteria
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10. Exercises Teamwork within the work group by working collaboratively as a team member to accomplish stated goals.	Supports the team in meeting essential objectives. Responsibly accomplishes work assignments within established timeframes in support of team objectives. Effectively cooperates with and contributes to help meet established team results. Works to encourage good performance from others.	368	368	365 ✓
Total Checks	(Total Number of Checks in Each Column)	✓	6✓	4✓
Check Value	(Multiply Total of Column Checks by Designated Number in Column)	X 1	X 2	X 3
Points Accumulated	(Record Results of Column Multiplication)		12	12
Total Points Accumulated	(Total All Points Across All Columns)			24 ⁶⁰⁰

32.
 Data
 MED TRIP

EXHIBIT 10

Rating Cycle Ending 2004

Active Model # A90651

Performance Assessment Review
Work Standard Checklist Model
New Jersey Department of Human Services
North Jersey Developmental Center

Employee Name: Phyllis Atkinson Title: PCT Rating Period: March 1, 2003 - February 28, 2004
SSN: 157 54 6131 Dept/Agency - Location: DHS/DDC - North Jersey Developmental Center

Section 3 - Justification Sheet and Development Plan - Interim

Justification for Interim Evaluation 700

Ms Atkinson has the primary responsibility of coordinating in-coming off campus medical trips. She also prepares the weekly med trip calendar for distribution to various disciplines @ NJDC.

600

27 = 3

Interim Development Plan	
Specific Area(s) Identified for Development	Specific Action to be Taken by Ratee
705 ① Continue, with the assistance of nursing/medical staff to improve scheduling of medical trips in an expeditious manner.	① Confer with HCC/growers/MDS NP's & den ADRL & T.A. to assure outside consultations as needed.
② Enter and update as needed, nursing, medical information in the computer data sheets	② Complete, before this year's end (2003) the required information in the HCC's nursing computer data sheet
<p>I have reviewed Sections 1, 2 and 3 of this package and have had a face-to-face meeting with my supervisor to discuss the Interim Rating, Justification and Development Plan. This meeting was held on <u>8/21/03</u> (Date) 710</p> <p>My signature indicates that I have been advised of these PAR elements.</p> <p>Ratee <u>[Signature]</u> 715</p> <p>Date <u>8/21/03</u> 720</p> <p>I <input checked="" type="checkbox"/> Agree <input type="checkbox"/> Disagree with the Interim Rating. 725 I <input checked="" type="checkbox"/> Agree <input type="checkbox"/> Disagree with the Justification. 730 I <input checked="" type="checkbox"/> Agree <input type="checkbox"/> Disagree with the Development Plan. 735</p>	
<p>Ratee Comments 760</p> <p>ATKINSON EEO 57</p> <p>(Use Additional Sheets as Necessary)</p>	
<p>My signature indicates that the Ratee's positions have been noted.</p> <p>Rater <u>Guanne Primers for</u> 740</p> <p>Date <u>8/21/03</u> 745</p> <p>Rater's Social Security # <u>[Redacted]</u></p>	
<p>My signature indicates that the Ratee's positions have been noted.</p> <p>Reviewer <u>Carol Hinkle R. ADL</u> 750</p> <p>Date <u>8/21/03</u> 755</p>	

- ③ To Keep current with mandatory HIPAA/OPBA training/regulations
- ③ Attend mandatory HIPAA/OPBA on campus/off campus seminars.